## FORM D

Washington, DC

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

	UMB_AP	PROVAL
	OMB Number	3235-0076
	Expires:	April 30, 2008
-	Estimated average	burden
_	hours per response	16.00

FORM D

NOTION OF CALE OF CHARACTERS A CARC	s	EC USE ONL	.Y
NOTICE OF SALE OF SECURITIES 1 5 200 PURSUANT TO REGULATION D,	O Prefix	1 1	Serial
SECTION 4(6), AND/OPHOMSON REFORM LIMITED OFFERING EXEMPTION	UTERS D	ATE RECEIV	ED
and name has changed, and indicate change.)			

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Shares of AlphaGen Velas Fund Limited
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 4(6) ULOE  Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)
AlphaGen Velas Fund Limited
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number ( PO Box 513 Strathvale House North Church Street George Town, Grand Cayman, Cayman Islands  (Number and Street, City, State, Zip Code) + 1 345 914 7552  08053304
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)  (if different from Executive Offices)
Brief Description of Business
Private Investment Fund
Type of Business Organization  corporation  limited partnership, already formed  business trust  limited partnership, to be formed  other (please specify): Cayman Islands Exempted Company  to ther (please specify): Cayman Islands Exempted Company
Month Year  Actual or Estimated Date of Incorporation or Organization: 03 03 ☑ Actual ☐ Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction) FN

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

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Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amondments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not

SEC 1972 (6-02)

required to respond unless the form displays a currently valid OMB control number.

1 of 8

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)	······································	· · · · · ·	_				
Bovet, Robert								
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
1115 Vullierens, Vaud, Sw	itzerland							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·					
Aitkenhead, Les								
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
8 Fenchurch Place, Londo	n EC3M 4PB,	United Kingdom						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)							
Lubbock, Kenneth								
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
<b>Montrose Advisors 505</b>	Park Avenue	, 20 <sup>th</sup> Floor New Yor	k, NY 10022, USA					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)			. =				
Schaeppi, Juerg								
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
Bank Am Bellevue Sees	trasse 16 Pos	tfach CH8700 Kusna	cht, Zurich, Switzerla	nd				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)	<del></del>						
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)	-				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)								
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)					
	(Use b	lank sheet, or copy and u	se additional copies of thi	s sheet, as neces	sary)			

B. INFORMATION ABOUT OFFERING															
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes ⊠	No □				
	Anguarates in Amendia Column 2 if filing under III OF								K)	Ц					
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								,	\$ 100,0	100				
3.	Does the offe					_								Yes	No
														$\boxtimes$	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								associated er. If more						
	Name (Last n	ame first, i	if individu	ai)											
Bus	iness or Reside														
	tmore House			London 1	United Kir	ngdom EC	3M 4PB								
	ne of Associati timore Distrib														
Stat	es in Which Po	erson Liste	d Has Soli	icited or In	tends to S	olicit Purcl	nasers								
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Nan	ne of Associate	ed Broker	or Dealer		· ·										
	es in Which Po				tends to S	olicit Purcl	nasers								
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	Name (Last n n Early	ame first, i	f individu	al)								-			
	iness or Reside														
	ne of Associate				<del></del>								-		
Stat	es in Which Po	rson Liste	d Has Soli	cited or In	tends to Se	olicit Purch	nasers								
(Check "All States" or check individual States)								🔲 All	States						
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$		_	\$
	Equity	\$ <u>1,0</u>	000,000,000		\$ <u>50,100,000</u>
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		_	\$
	Partnership Interests	\$		_	\$
	Other (Specify_)	\$			\$
	Total	\$	1,000,000,000		\$50,100,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		2	_	\$50,100,000
	Non-accredited Investors			_	\$
	Total (for filings under Rule 504 only)				\$
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
			Type of		Dollar Amount
	Type of Offering		Security		Sold
	Rule 505				\$
	Regulation A	•		_	\$
	Rule 504		<u> </u>	_	\$
	Total			_	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees				\$
	Printing and Engraving Costs	•••••			\$
	Legal Fees	•••••		$\boxtimes$	\$\$
	Accounting Fees		***************************************		\$
	Engineering Fees				
	Sales Commissions (specify finder's fees separately)				
	Other Expenses (identify)				
	Total	•••••		$\bowtie$	\$50,000
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$999,950,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proce proposed to be used for each of the purposes shown purpose is not known, furnish an estimate and check t estimate. The total of the payments listed must exproceeds to the issuer set forth in response to Part C – 6	If the amount for any he box to the left of the qual the adjusted gross	Payments to		
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees	***************************************	<b>\$</b>	<b>\$</b>	
	Purchase of real estate		<b>\$</b>	<b>\$</b>	
	Purchase, rental or leasing and installation of machiner	y and equipment	<b>\$</b>	<b>\$</b>	
	Construction or leasing of plant buildings and facilities	·	□ \$	<b>\$</b>	
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	e for the assets	<b></b>	□ \$_	
	Repayment of indebtedness				
	Working capital		□ \$	\$	
	Other (specify): Investment Capital		□ \$		
followi	Total Payments Listed (column totals added)  D. FEDE  uer has duly caused this notice to be signed by the under  ng signature constitutes an undertaking by the issuer to  of its staff, the information furnished by the issuer to an	ERAL SIGNATURE ersigned duly authorized o furnish to the U.S. Sec	≥ \$ 999,950,000  person. If this notice is file curities and Exchange Com	ed under Rule 505, the mission, upon written	
•	Print or Type) Gen Velas Fund Limited	Signature h Amin	Thead Date 7/2	108	
Name o	f Signer (Print or Type)	Title of Signer (Print or		-	
LES 1	4 ITHENHEMS	Director			
			END		
		ATTENTION			
	Intentional misstatements or omissions of fact of	constitute federal criminal s	violations. (See 18 U.S.C. 1001	l <b>.</b> )	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS